ired by Section 103(c) of the ive Environmental Responn, and Liability Act of 198 ailed by June 9, 1981.	he Compre- ise. Compen-	Please type or print	in ink. If you need		Washington DC 204
	This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.			Holand	av y
	1	810	608 C.	45100	00144
on Required to Notify:	11			,,,,,,	0 - / / / .
Enter the name and address of the person or organization required to notify.		Street P.O. E			
	· <del>-</del>	City Carson		State CA	Zip Code 9074
Location:			1. + 0	7.	
Enter the common name (if known) and actual location of the site.  CAD 9806 36500		Name of Site Southwest Conservation  20300?  Street 20201 5. Main Street			
		city Carson	County LA	State CA	Zip Code 90743
on to Contact:			A1.		
the name, title (if applical	ble), and	Name (Last, First and Title	O'Hare, Richa	rd; Envir	. Cons. Mgr
business telephone number of the person to contact regarding information submitted on this form.		Phone (2/3)	835 - 56//		<b>~</b> .
s of Waste Handling:				<del></del>	
the years that you estima nent, storage, or disposal b at the site.	ite waste began and	From (Year) 196	8 To (Year) 196	68	
o not know the general wa	types and source categories. If vaste types or sources, you are in Item I—Description of Site.  Source of Waste:		Option 2: This option Resource Conservatio regulations (40 CFR P	n and Recovery A art 261).	ersons familiar with s Act (RCRA) Section 3
an X in the appropriate The categories listed p. Check each applicable bry.		waste: K in the appropriate	Specific Type of Was EPA has assigned a foliated in the regulation appropriate four-digit the list of hazardous workering the EPA Re	our-digit number ns under Section number in the bo vastes and codes	3001 of RCRA. Ente exes provided. A cop- can be obtained by
Organics	1. 🗆 <b>M</b> ir	ing	located.		
Inorganics	2. 🗆 Cor				
Solvents	3. □ Tex				
Pesticides Heavy metals	4. ☐ Feri	ilizer er/Printing			
Acids		er/Printing ther Tanning			
Bases		/Steel Foundry			
PCBs		mical, General			
Mixed Municipal Waste		ing/Polishing			
Unknown		tary/Ammunition			
Other (Specify)		trical Conductors			
	12. □ Trai	· · · · · · · · · · · · · · · · · · ·		·	
		ty Companies		•	· /
		itary/Refuse	1 0 JUN 1981		_
· <del>-</del>	15. 🗆 Pho	*	I 0 1014 1301		60030
		· ·		•	
		,	1 R: E	<u> 5. 24.</u>	
			+ + + + + + + + + + + + + + + + + + +	13 1	
•				CELLA	D DECORD
					D RECORDS CTR
pproved	/		•	2	388670
ne	roved 2000-0138	16. □ Lab. 17. □ Unk 18. ☒ Oth  Petrole  Operation 2000-0138	16. □ Lab/Hospital 17. □ Unknown 18. ☒ Other (Specify) Petroleum Refinery Operations	16. □ Lab/Hospital  17. □ Unknown  18. ☒ Other (Specify)  Petroleum Refinery  Operations	16. □ Lab/Hospital  17. □ Unknown  18. ☒ Other (Specify)  Petroleum Refinery  Operations  2

F	Waste Quantity:	Facility Type	Total <u>Facility</u> Waste Amount				
л -	Place an X in the appropriate boxes to	1. 🗆 Piles	cubic feet				
	indicate the facility types found at the	2.   Land Treatment	nellions 1 377 600 G				
9 (1	In the "total facility waste amount" space give the estimated combined quantity	3. 🗆 Landfill	ganons 1, 3 1 1				
	(volume) of hazardous wastes at the site	4. ☐ Tanks 5. ☐ Impoundment	Total Facility Area				
	using cubic feet or gallons.	6. ☐ Underground Injection	square feet				
	In the "total facility area" space, give the estimated area size which the facilities	7. Drums, Above Ground	acres Unknaum				
	occupy using square feet or acres.	8. Drums, Below Ground					
		9. 図 Other (Specify) <u>Unkno</u>	Wh				
G	Known, Suspected or Likely Releases to the Environment:						
	Place an X in the appropriate boxes to indicate any known, suspected, Pon Y known Suspected Likely None or likely releases of wastes to the environment.						
	Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessin hazardous waste sites. Although completing the items is not required, you are encouraged to do so.						
H	Sketch Map of Site Location: (Optional)						
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing						
	the direction north. You may substitute a publishing map showing the site location.						
			•				
	•						
	· · .						
	·	•					
			•				
_	Description of Site: (Optional)						
•	Describe the history and present						
	conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which						
	may help describe the site conditions.						
	This was a commercial disposer. Waste amount shown						
	is contribution from Shell Oil Co. only.						
		, , , , , , , , , , , , , , , , , , , ,					
J	Signature and Title:	<u> </u>					
	The person or authorized representative	Name T. E. Innocenzi	, Manager				
	(such as plant managers, superintendents, trustees or attorneys) of persons required	P.O. Box 6249	Owner, Past				
	to notify must sign the form and provide a	Street Same as A	🗆 Transporter				
	mailing address (if different than address in item A). For other persons providing	City CARSON State	e CA zip Code 90744 □ Operator, Present				
	notification, the signature is optional.  Check the boxes which best describe the	July July July July July July July July	- L L St Oahan				
	relationship to the site of the person required to notify. If you are not required	Signature / E Junney	. Date // /y,				
	to notify check "Other".		•				